

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725810

Entity Name: PELICAN YACHT CLUB, INC.**Current Principal Place of Business:**1120 SEAWAY DR
FT PIERCE, FL 34949**Current Mailing Address:**1120 SEAWAY DR
FT PIERCE, FL 34949 US**FEI Number:** 59-0572390**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH, FL 33401 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D, VICE COMMODORE
Name	JACOBS, JOHN
Address	4701 OLEANDER AVE
City-State-Zip:	FORT PIERCE FL 34982

Title	DC
Name	JUDGE, JULIE
Address	1606 FRANCES AVE
City-State-Zip:	FORT PIERCE FL 34949

Title	D, COMMODORE
Name	GALINIS, JAIMEBETH
Address	1710 PLOVER AVE
City-State-Zip:	FT. PIERCE FL 34949

Title	DIRECTOR, SECRETARY
Name	BECKFORD, DANIELLE
Address	7 HARBOUR ISLE DR. #204
City-State-Zip:	FT. PIERCE FL 34949

Title	DIRECTOR
Name	FLICKINGER, KEN
Address	2817 N. INDIAN RIVER DRIVE
City-State-Zip:	FT. PIERCE FL 34946

Title	DIRECTOR, REAR COMMODORE
Name	KAUFFMANN, KYLE
Address	2919 S. INDIAN RIVER DRIVE
City-State-Zip:	FORT PIERCE FL 34982

Title	DIRECTOR
Name	THOMPSON, PHILLIP
Address	305 FERNADINA STREET
City-State-Zip:	FORT PIERCE FL 34949

Title	D
Name	REYNOLDS, BRITT
Address	1120 SEAWAY DRIVE
City-State-Zip:	FDT. PIERCE FL 34949

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIELLE BECKFORD**SECRETARY****04/28/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title D
Name HAHNEMAN, RODGER
Address 1120 SEAWAY DR
City-State-Zip: FT PIERCE FL 34949

Title TREASURER
Name CAIN, JUSTIN
Address 1120 SEAWAY DR
City-State-Zip: FT PIERCE FL 34949

Title D
Name HARRIS, LAUREN
Address 1120 SEAWAY DR
City-State-Zip: FT PIERCE FL 34949